

[Caption as in Form 416A, 416B, or 416D, as appropriate]

NOTICE OF APPEAL AND STATEMENT OF ELECTION

Part 1: Identify the appellant(s)

1. Name(s) of appellant(s): ERLINDA ABIGAIL ANIEL
2. Position of appellant(s) in the adversary proceeding or bankruptcy case that is the subject of this appeal:

For appeals in an adversary proceeding.

☐ Plaintiff

☐ Defendant

☐ Other (describe) _____

For appeals in a bankruptcy case and not in an adversary proceeding.

☐ Debtor

☒ Creditor

☐ Trustee

☐ Other (describe) _____

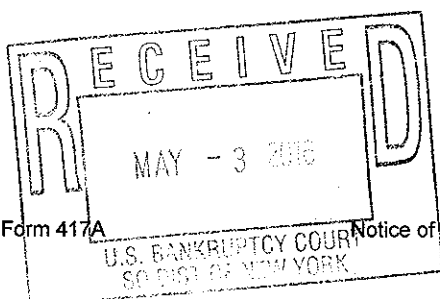
Part 2: Identify the subject of this appeal

1. Describe the judgment, order, or decree appealed from: MEMORANDUM OPINION & ORDER AFTER THE TRIAL (MOO)
2. State the date on which the judgment, order, or decree was entered: 4/20/16

Part 3: Identify the other parties to the appeal

List the names of all parties to the judgment, order, or decree appealed from and the names, addresses, and telephone numbers of their attorneys (attach additional pages if necessary):

1. Party: Residential CAPITAL, LLC et al Attorney: Morrison & Foerster LLP
ResCap Borrower 250 West 55th Street
NEW YORK, NY 10019
Jordan Wisniewski, Jessica Arlett
2. Party: Claims Trust Attorney: SAME AS ABOVE

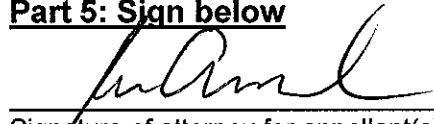


Part 4: Optional election to have appeal heard by District Court (applicable only in certain districts)

If a Bankruptcy Appellate Panel is available in this judicial district, the Bankruptcy Appellate Panel will hear this appeal unless, pursuant to 28 U.S.C. § 158(c)(1), a party elects to have the appeal heard by the United States District Court. If an appellant filing this notice wishes to have the appeal heard by the United States District Court, check below. Do not check the box if the appellant wishes the Bankruptcy Appellate Panel to hear the appeal.

☒ Appellant(s) elect to have the appeal heard by the United States District Court rather than by the Bankruptcy Appellate Panel.

Part 5: Sign below



Signature of attorney for appellant(s) (or appellant(s)
if not represented by an attorney)

Date: 5/2/16

Name, address, and telephone number of attorney
(or appellant(s) if not represented by an attorney):

ERICINDA ABIBAC AMIEL
75 Tabor Clark Dr.
Hillsborough, CA 94010

Fee waiver notice: If appellant is a child support creditor or its representative and appellant has filed the form specified in § 304(g) of the Bankruptcy Reform Act of 1994, no fee is required.